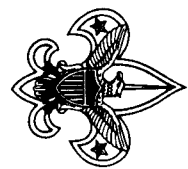


APPLICATION TO USE COUNCIL CAMPS & EQUIPMENT

W.D. BOYCE COUNCIL  
BOY SCOUTS OF AMERICA  
614 N.E. MADISON  
PEORIA, IL 61603  
309/673-6136 OR 1-800-369-5069



UNIT (PACK, TROOP, TEAM, POST) NO. \_\_\_\_\_ DISTRICT \_\_\_\_\_ DATE \_\_\_\_\_

NON-SCOUT ORGANIZATION \_\_\_\_\_

FACILITIES DESIRED: \_\_\_\_\_

CAMP \_\_\_\_\_ CAMPSITE \_\_\_\_\_ #ROWBOATS \_\_\_\_\_ #CANOES \_\_\_\_\_ TRAILERS \_\_\_\_\_  
yes or no

CABINS (SPECIFY NAME) \_\_\_\_\_

PICNIC AREA \_\_\_\_\_ SWIMMING POOL \_\_\_\_\_ FISHING \_\_\_\_\_

OTHER FACILITIES \_\_\_\_\_

NUMBER OF YOUTH \_\_\_\_\_ NUMBER OF ADULTS \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ TIME \_\_\_\_\_ DEPARTURE DATE \_\_\_\_\_ TIME \_\_\_\_\_

TO BE SIGNED BY THE LEADER IN CHARGE:  
IF SWIMMING, WE WILL ABIDE BY THE 8PT. DEFENSE PLAN.  
IF BOATING/CANOEING WE WILL ABIDE BY THE SAFETY  
AFLOAT PLAN.

(Signed)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, & ZIP \_\_\_\_\_

PHONE# - BUS. \_\_\_\_\_ HOME \_\_\_\_\_

IN THE EVENT OF A CHANGE IN PLANS OR THE CASE OF EMERGENCY, PLEASE NOTIFY THE APPROPRIATE CAMP RANGER.  
INGERSOLL 309/486-3398

White copy for Council - Yellow copy for Ranger - Pink copy returned to unit after approval

COUNCIL USE ONLY

RANGER REPORT:	APPROVED _____
CAMP PROPERTY _____	DATE _____
CAMP EQUIPMENT _____	FEES:
#YOUTH _____ #ADULTS _____	BOATS & CANOES _____
GROUP TO BE BILLED FOR THE	CABINS _____
FOLLOWING: _____	SWIMMING POOL _____
COMMENTS _____	CANOE TRAILER _____
OTHER _____	OTHER _____
FEES COLLECTED \$ _____	FACILITIES _____
RANGER: _____	TOTAL FEES _____
	BILLING MADE _____